No. W 26777  Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	ADMIN DISSOLVED 02/04/2010  CRETARY OF STATE O BOX 83720  ADMIN DISSOLVED 02/04/2010  1. Mailing Address: Correct in this box if needed.  LIMELIGHT, LLC (THE)			2. Registered Agent and Office (NOT A P.O. BOX)  BARRY DELANO BRADFORD JR  -3638 E RAJA DR 3575 E . COMEN  MERIDIAN ID 83642  3. New Registered Agent Signature.			
REINSTATEMENT FEE DUE: \$30.00				1			
Umited Liability Companion     Office Held     Name		and Addresses of Managers Street or PO Ad		City	State	Country	Postal Code
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5. Organized Under the Later IDAHO	vs of:  6.	ure: DUL	Gran	lfus		Date:	stidio
W 26777	Name	(type or print): Del M	lad form			Title:	MALICIX
Issued 02/18/2010 by DK1							CH 191-3

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a **Post Office Box or Personal Mail Box.** 

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: <u>Do not put "same as last year" or "same as above".</u>
These will not be accepted.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.